

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Amedisys, Inc. Political Action Committee

ADDRESS (number and street)

5959 South Sherwood Forest Blvd

Check if different
than previously
reported. (ACC)

Baton Rouge

LA

70816

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00436360

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2009

through

07

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Dale E. Redman

Signature of Treasurer

Electronically Filed by Dale E. Redman

Date

08

11

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 24

Write or Type Committee Name
Amedisys, Inc. Political Action Committee

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1		
2009		41351.96
(b) Cash on Hand at Beginning of Reporting Period	51917.15	
(c) Total Receipts (from Line 19)	35425.00	77400.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	87342.15	118751.96
7. Total Disbursements (from Line 31)	5000.00	36409.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	82342.15	82342.15
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

3 / 24

Write or Type Committee Name

Amedisys, Inc. Political Action Committee

Report Covering the Period:

From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	27755.34	64055.34
(ii) Unitemized	7669.66	8344.66
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35425.00	72400.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35425.00	72400.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35425.00	77400.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35425.00	77400.00

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	36400.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	9.81	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5000.00	36409.81	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	36409.81	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 24

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	35425.00	72400.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35425.00	72400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Donna Batts

Mailing Address 104 Princess Circle

City

Newnan

State

GA

Zip Code

30265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4509

Amount of Each Receipt this Period

750.00

contr

B.

Full Name (Last, First, Middle Initial)

Judith Bleau

Mailing Address 120 Cooley Street

City

Agawam

State

MA

Zip Code

01001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4483

Amount of Each Receipt this Period

250.00

Contr

C.

Full Name (Last, First, Middle Initial)

David Bucey

Mailing Address 927 Keed Ave.

City

Baton Rouge

State

LA

Zip Code

70806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4531

Amount of Each Receipt this Period

340.00

contr

SUBTOTAL of Receipts This Page (optional)

1340.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Jill Cannon

Mailing Address 2323 Ooltewah Ringgold Raod

City

Ooltewah

State

TN

Zip Code

37363

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc

Occupation

SVP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4537

Amount of Each Receipt this Period

600.00

contr

B.

Full Name (Last, First, Middle Initial)

Daniel Cundiff

Mailing Address 7676 Santa Margherita Way

City

Naples

State

FL

Zip Code

34109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4549

Amount of Each Receipt this Period

390.00

contr

C.

Full Name (Last, First, Middle Initial)

Jessica Flynn

Mailing Address 8042 Glendale Rd

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4487

Amount of Each Receipt this Period

1000.00

Contr

SUBTOTAL of Receipts This Page (optional)

1990.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kathleen Galida

Mailing Address 124 Avon Drive

City

Butler

State

PA

Zip Code

16001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4492

Amount of Each Receipt this Period

250.00

Contr

B.

Full Name (Last, First, Middle Initial)

Tad Gaspard

Mailing Address 156 Gaspard Dr.

City

Lockport

State

LA

Zip Code

70374

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4574

Amount of Each Receipt this Period

250.00

Contr

C.

Full Name (Last, First, Middle Initial)

Mellissa Geci

Mailing Address 5311 Canterdale Avenue

City

Baton Rouge

State

LA

Zip Code

70817

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Human Resources

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

530.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4576

Amount of Each Receipt this Period

330.00

contr

SUBTOTAL of Receipts This Page (optional)

830.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 24

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Bobby George

Mailing Address 1175 Shell Lane

City

Clayton

State

CA

Zip Code

94517

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4577

Amount of Each Receipt this Period

1500.00

contr

B.

Full Name (Last, First, Middle Initial)

Scott Ginn

Mailing Address 19028 Spyglass Hill

City

Baton Rouge

State

LA

Zip Code

70809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4581

Amount of Each Receipt this Period

250.00

contr

C.

Full Name (Last, First, Middle Initial)

Scott Ginn

Mailing Address 19028 Spyglass Hill

City

Baton Rouge

State

LA

Zip Code

70809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3556.89

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4768

Amount of Each Receipt this Period

1306.89

Contr

SUBTOTAL of Receipts This Page (optional)

3056.89

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Anna Gordinier

Mailing Address 7525 Nantucket

City

Darien

State

IL

Zip Code

60561

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4485

Amount of Each Receipt this Period

300.00

Contr

B.

Full Name (Last, First, Middle Initial)

Deborah Griffin

Mailing Address 20092 Bayfront Lane Apt. 201

City

Huntington Beach

State

CA

Zip Code

92646

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4586

Amount of Each Receipt this Period

1200.00

contr

C.

Full Name (Last, First, Middle Initial)

Christopher Hufft

Mailing Address 510 Plantation Ridge

City

Baton Rouge

State

LA

Zip Code

70810

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4601

Amount of Each Receipt this Period

250.00

contr

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Billie Johnson

Mailing Address 1422 New Bolton Dr.

City

Port Orange

State

FL

Zip Code

32129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4604

Amount of Each Receipt this Period

250.00

contr

B.

Full Name (Last, First, Middle Initial)

Susan Kane

Mailing Address P.O. Box 375

City

Westfield

State

ME

Zip Code

01086

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4606

Amount of Each Receipt this Period

250.00

contr

C.

Full Name (Last, First, Middle Initial)

Cheryl Lacey

Mailing Address 11443 S Emerson Avenue

City

Jenks

State

OK

Zip Code

74037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation
Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4610

Amount of Each Receipt this Period

975.00

contr

SUBTOTAL of Receipts This Page (optional)

1475.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Theresa Ledgerwood

Mailing Address 1304 W. Lakeview Dr.

City

Johnson City

State

TN

Zip Code

37601

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmedisysOccupation
Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

Transaction ID: SA11AI.4613

Amount of Each Receipt this Period

240.00

contr

B.

Full Name (Last, First, Middle Initial)

Sheila Littleton

Mailing Address 3756 Holston college Red.

City

Louisville

State

TN

Zip Code

37777

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmedisysOccupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

Transaction ID: SA11AI.4623

Amount of Each Receipt this Period

250.00

contr

C.

Full Name (Last, First, Middle Initial)

Carolyn Mason

Mailing Address 701 Evans Dr.

City

Middlesboro

State

KY

Zip Code

40965-1418

FEC ID number of contributing
federal political committee.

C

Name of Employer
AmedisysOccupation
Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	9

Transaction ID: SA11AI.4629

Amount of Each Receipt this Period

300.00

contr

SUBTOTAL of Receipts This Page (optional)

790.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 13 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Donna Massie

Mailing Address 8106 Caneadea Trail

City

Chattanooga

State

TN

Zip Code

37421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4471

Amount of Each Receipt this Period

1000.00

Cont

B.

Full Name (Last, First, Middle Initial)

Carleen McKeehan

Mailing Address 517 Chimney Rock Dr.

City

Lenoir City

State

TN

Zip Code

37771

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4637

Amount of Each Receipt this Period

250.00

contr

C.

Full Name (Last, First, Middle Initial)

Stephanie Mears

Mailing Address 9 Bridadoon Place

City

Charleston

State

SC

Zip Code

29414

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4639

Amount of Each Receipt this Period

500.00

contr

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Marisa Morgan

Mailing Address 410 Paddock Lane

City

Simpsonville

State

KY

Zip Code

40067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.45

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4645

Amount of Each Receipt this Period

288.45

contr

B.

Full Name (Last, First, Middle Initial)

Sandra Morgan

Mailing Address 2213 Cane Valley Rd.

City

Columbia

State

KY

Zip Code

42728

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4647

Amount of Each Receipt this Period

250.00

contr

C.

Full Name (Last, First, Middle Initial)

Delia Morton

Mailing Address 23297 Western Ct.

City

Auburn

State

CA

Zip Code

95602

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4649

Amount of Each Receipt this Period

300.00

contr

SUBTOTAL of Receipts This Page (optional)

838.45

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Pamela Kay Nary

Mailing Address 422 Lynhaven Drive

City

Charleston

State

WV

Zip Code

25302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4474

Amount of Each Receipt this Period

1000.00

Contr

B.

Full Name (Last, First, Middle Initial)

Susan Northover

Mailing Address 130 Bon Aire Avenue

City

New Rochelle

State

NY

Zip Code

10804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4497

Amount of Each Receipt this Period

1500.00

Contr

C.

Full Name (Last, First, Middle Initial)

Donna O'Hara

Mailing Address 16 Charles Johnson

City

Southwick

State

MA

Zip Code

01077

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4651

Amount of Each Receipt this Period

250.00

contr

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kathleen Paulson

Mailing Address 5501 Mainhardt Rd.

City

Westminster

State

CA

Zip Code

92683

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4663

Amount of Each Receipt this Period

250.00

contr

B.

Full Name (Last, First, Middle Initial)

Kathy Picou

Mailing Address 3979 Highway 311

City

Houma

State

LA

Zip Code

70360

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4666

Amount of Each Receipt this Period

300.00

Contr

C.

Full Name (Last, First, Middle Initial)

Michael D. Pitts

Mailing Address 38388 Oakland Drive

City

Prairieville

State

LA

Zip Code

70769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation
VP of Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4668

Amount of Each Receipt this Period

50.00

Contr

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Edward Plocek

Mailing Address 1722 Archwood Lane

City

Toledo

State

OH

Zip Code

43614

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4669

Amount of Each Receipt this Period

60.00

Contr

B.

Full Name (Last, First, Middle Initial)

Karen Powers

Mailing Address 4530 SW 170th Street

City

Ocala

State

FL

Zip Code

34473

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4672

Amount of Each Receipt this Period

250.00

Contr

C.

Full Name (Last, First, Middle Initial)

Rita Pridemore

Mailing Address 181 Rolling Meadows Drive

City

Summerville

State

SC

Zip Code

29485

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4676

Amount of Each Receipt this Period

1500.00

Contr

SUBTOTAL of Receipts This Page (optional)

1810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 18 / 24

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Elizabeth Pyzik

Mailing Address 2825 North 73rd Ave

City

Elmwood Park

State

IL

Zip Code

60707

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4680

Amount of Each Receipt this Period

400.00

Contr

B.

Full Name (Last, First, Middle Initial)

Kathleen Reilly

Mailing Address 1511 Karley Drive

City

Opelika

State

AL

Zip Code

36801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4682

Amount of Each Receipt this Period

750.00

Contr

C.

Full Name (Last, First, Middle Initial)

Cindy Ritchie

Mailing Address 310 North Castles Valley Road

City

Blue Ridge

State

GA

Zip Code

30513

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4692

Amount of Each Receipt this Period

125.00

Contr

SUBTOTAL of Receipts This Page (optional)

1275.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 19 / 24

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Elizabeth Robinson

Mailing Address 9216 Mountain Shade Drive

City

Chattanooga

State

TN

Zip Code

37421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4501

Amount of Each Receipt this Period

1000.00

Contr

B.

Full Name (Last, First, Middle Initial)

Sandra Roskos

Mailing Address 1064 Cross Creek Drive

City

Uniontown

State

PA

Zip Code

15401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4697

Amount of Each Receipt this Period

600.00

Contr

C.

Full Name (Last, First, Middle Initial)

Sheryl Rossignol

Mailing Address 35 Oakwood Drive

City

Portsmouth

State

NH

Zip Code

03801

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4499

Amount of Each Receipt this Period

1000.00

Contr

SUBTOTAL of Receipts This Page (optional)

2600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 20 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Lisa Rowland

Mailing Address 1 Sheridan Road

City

Chattanooga

State

TN

Zip Code

37412

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4472

Amount of Each Receipt this Period

1000.00

Contr

B.

Full Name (Last, First, Middle Initial)

Jo Saltzman

Mailing Address 2911 Brandt Road

City

Wadesville

State

IN

Zip Code

47638

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4699

Amount of Each Receipt this Period

400.00

Contr

C.

Full Name (Last, First, Middle Initial)

Jennye Schindler

Mailing Address 40 Panther Court

City

Hoschton

State

GA

Zip Code

30548

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4702

Amount of Each Receipt this Period

300.00

Contr

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 21 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Anna Shterenberg

Mailing Address 1900 Summer Street

City

Stamford

State

CT

Zip Code

06905

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4712

Amount of Each Receipt this Period

450.00

Contr

B.

Full Name (Last, First, Middle Initial)

Patricia Texter

Mailing Address 1707 Manor Ridge Drive

City

Lancaster

State

PA

Zip Code

17603

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4734

Amount of Each Receipt this Period

250.00

Contr

C.

Full Name (Last, First, Middle Initial)

Jeffrey Thomas

Mailing Address 5959 Sherwood Forest

City

Baton Rouge

State

LA

Zip Code

70816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4466

Amount of Each Receipt this Period

250.00

Contr

SUBTOTAL of Receipts This Page (optional)

950.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 22 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Teresa Twilley

Mailing Address 3422 Tall Pines Lane

City

Snow Hill

State

MD

Zip Code

21863

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Management

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4738

Amount of Each Receipt this Period

375.00

Contr

B.

Full Name (Last, First, Middle Initial)

Deshea Waguespack

Mailing Address 41112 Highway 933

City

Prairieville

State

LA

Zip Code

70769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4746

Amount of Each Receipt this Period

375.00

Contr

C.

Full Name (Last, First, Middle Initial)

Robert Weger

Mailing Address 1242 W Spring Meadow Lane

City

Kaysville

State

UT

Zip Code

84037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys, Inc.

Occupation

Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4494

Amount of Each Receipt this Period

1000.00

Contr

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 24

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Kathryn Wiedman

Mailing Address 942 E Calle Del

City

Chandler

State

AZ

Zip Code

85225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4750

Amount of Each Receipt this Period

250.00

Contr

B.

Full Name (Last, First, Middle Initial)

Troy Yarborough

Mailing Address 457 South Oakley Lane

City

Spartanburg

State

SC

Zip Code

29301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Amedisys

Occupation
Senior VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 7 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.4764

Amount of Each Receipt this Period

250.00

Contr

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

27755.34

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 24

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Amedisys, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)

BLUE DOG POLITICAL ACTION COMMITTEE

Mailing Address 6849 Old Dominion Drive
Suite 222

City McLean State VA Zip Code 22101

Purpose of Disbursement
Contribution

Candidate Name
BLUE DOG POLITICAL ACTION COMMITTEE

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.4769

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)